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In the House of Representatives
Wednesday, May 21, 2003

***E1011** MERCURY IN MEDICINE REPORT

SPEECH OF

HON. DAN BURTON OF INDIANA

Tuesday, May 20, 2003

Mr. BURTON of Indiana.

Mr. Speaker, I submit the following report prepared by the staff of the Subcommittee on Human Rights and Wellness, Committee on Government Reform. This report is the result of a three-year investigation initiated in the Committee on Government Reform.

***E1012** MERCURY IN MEDICINE-TAKING UNNECESSARY RISKS

I. EXECUTIVE SUMMARY

Vaccines are the only medicines that American citizens are mandated to receive as a condition for school and day care attendance, and in some instances, employment. Additionally, families who receive federal assistance are also required to show proof that their children have been fully immunized. While the mandate for which vaccines must be administered is a state mandate, it is the Federal Government, through the Centers for Disease Control and Prevention (CDC) and its Advisory Committee for Immunization Practices that make the Universal Immunization Recommendations to which the majority of states defer when determining mandates. Since the early to mid-1990s, Congress has been concerned about the danger posed by mercury in medical applications, and in 1997, directed the Food and Drug Administration (FDA) to evaluate the human exposure to mercury through foods and drugs.

In 1999, following up on the FDA evaluation and pursuant to its authority, the House Committee on Government Reform initiated an investigation into the dangers of exposure to mercury through vaccination. The investigation later expanded to examine the potential danger posed through exposure to mercury in dental amalgams. This full committee investigation complemented and built upon the investigations

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risk-free, so these judgments are important. FDA will allow a product to present more of a risk when its potential benefit is great-especially for products used to treat serious, life-threatening conditions."

This argument-that the known risks of infectious diseases outweigh a potential risk of neurological damage from exposure to thimerosal in vaccines-is one that has continuously been presented to the Committee by government officials. FDA officials have stressed that any possible risk from thimerosal was theoretical, that no proof of harm ***E1030** existed. However, the Committee, upon a thorough review of the scientific literature and internal documents from government and industry, did find evidence that thimerosal did pose a risk.

Thimerosal used as a preservative in vaccines in likely related to the autism epidemic. This epidemic in all probability may have been prevented or curtailed had the FDA not been asleep at the switch regarding the lack of safety data regarding injected thimerosal and the sharp rise of infant exposure to this known neurotoxin. Our public health agencies' failure to act is indicative of institutional malfeasance for self-protection and misplaced protectionism of the pharmaceutical industry.

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